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**** CONTINUING DATA *******
 This appln claims benefit of 60/188,279 03/10/2000

**** FOREIGN APPLICATIONS *******

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****
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Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged /VANEL FRENEL/ Examiner's Signature	<input type="checkbox"/> Met after Allowance V.F. Initials	STATE OR COUNTRY CT	SHEETS DRAWINGS 18	TOTAL CLAIMS 125	INDEPENDENT CLAIMS 13
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TITLE
 METHODS AND APPARATUS FOR INCREASING AND/OR FOR MONITORING A PARTY'S COMPLIANCE WITH A SCHEDULE FOR TAKING MEDICINES

FILING FEE RECEIVED 3360	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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